	D STATEMEN	Docket No.									
STATUS	6 (37 CFR 1.9(031695.0031									
Application No.		Filing Date	Patent No.	Issue Date							
09/955,485		September 19, 2001									
Applicant/ Patentee:	Michael A.										
Invention:	Increasing	Cerebral Bioavailability	of Drugs								
I hereby de	clare that I am:										
☐ th	e owner of the s	small business concern identi	ified below:								
⊠ ar	an official of the small business concern empowered to act on behalf of the concern identified below:										
NAME OF C	NAME OF CONCERN: eNOS Pharmaceuticals, Inc.										
12222000	SE CONCEDNA	O O O DOLLO									
AUDKESS C	OF CONCERN:	One Canal Park, Can	nbridge, MA UZ141								
I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control both.											
		under contract or law have th regard to the above-identi	been conveyed to and remaified invention described in:	ain with the small business							
the	the specification filed herewith with title as listed above.										
⊠ the	the application identified above.										
the	patent identified above.										
organizatior other than	n having rights to the inventor, which would not qu	o the invention is listed below ho could not qualify as an	s concern are not exclusive, e w and no rights to the inventi- independent inventor under oncern under 37 CFR 1.9(d)	on are held by any person, 37 CFR 1.9(c) or by any							

				nave assigned, granted, convey or license any rig						
⊠ No su	such person, concern or organization exists.									
Each	such perso	n, concern or	organizat	ion is listed below.						
FULL NAME	····									
ADDRESS										
		Individual		Small Business Concern		Nonprofit Organization				
FULL NAME										
ADDRESS		<u> </u>			_					
		Individual		Small Business Concern		Nonprofit Organization				
FULL NAME										
ADDRESS		Individual		Small Business Concern		Nonprofit Organization	—			
FULL NAME		marvidaai		omaii business concern	U	Nonpront Organization				
ADDRESS										
ADDITEGO		Individual		Small Business Concern	. 🗆	Nonprofit Organization				
				each named person, cor ies. (37 CFR 1.27)	ncern or org	anization having right	ts to			
of entitlement t	o small enti	ty status prioi	to paying	or patent, notification of go, or at the time of paying tatus as a small entity	g, the earlie	est of the issue fee or	any			
on information knowledge that under Section	and belief t willful false 1001 of Title	are believed e statements a e 18 of the Un	to be tro and the lik ited State	of my own knowledge a ue; and further that the ke so made are punisha s Code, and that such w g thereon, or any pater	ese stateme ble by fine villful false s	ents were made with or imprisonment, or b tatements may jeopar	the oth, dize			
NAME OF PERS	ON SIGNIN	G: Shawn	Stovall							
TITLE OF PERS		G Chief O	perating	Officer			<u>_</u>			
ADDRESS OF P	PERSON SIG	••	Canal P bridge,	ark MA 02141						
SIGNATURE:	SL	an E.	Mon	nY	DATE	3-28.02				